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CONFIRMATION NO. 8183

SERIAL NUMBER 10/645,732	FILING OR 371(c) DATE 08/20/2003 RULE	CLASS 514	GROUP ART UNIT 1626	ATTORNEY DOCKET NO. 0833.US1
APPLICANTS Atli Thorarensen, O'Fallon, MI; J. Craig Ruble, Greenwood, IN; Donna Lee Romero, Chesterfield, MI;				
** CONTINUING DATA ***** This appln claims benefit of 60/405,464 08/23/2002				
** FOREIGN APPLICATIONS ***** None				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/22/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input type="checkbox"/> Allowance		STATE OR COUNTRY MI	SHEETS DRAWING 0	TOTAL CLAIMS 15
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		INDEPENDENT CLAIMS 1		
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TITLE Antibacterial agents				
FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	